

2018 Farm Vendor Application – Bloomington Community Farmers’ Market

Please fill out both sides completely. Additional pages may be included if necessary.

Print or type all information clearly and submit **with application fee of \$20** *(the application fee does not apply if all vendors on the contract are 16 years of age or younger)* and **signed contract** to:

Robin Kitowski, Market Master
City of Bloomington Parks and Recreation Department
P.O. Box 848 Bloomington, IN 47402

Applications must be received by Monday, March 19, 2018. If vendor is reserving a space, application is due at the space reservation meeting on Monday, February 26, 2018.

Vendor Information

Primary Vendor (one name only) _____

Additional Vendor(s): _____

Name of farm or business (if applicable)_____

Mailing address_____

City_____ Zip_____ County_____

Primary phone ()_____ Secondary phone ()_____

Email_____ Web site_____

Permission: Would you give the City permission to release your name, address, phone number, e-mail and other farm related information to be posted on the City website and given to people interested in contacting you? **Yes** ☐ **No** ☐

List any Stand Assistants – Stand Assistants are helpers who are not qualified Market vendors but who, as per the Contract, are allowed to assist vendor at Market.

Production Location Information

List each location and products raised there (attach additional sheets, if needed, including all of the information below). If additional locations and/or products are added during the Market season, vendor must notify Market staff in writing and get approval prior to using land and/or selling additional products. You may list this location as “same as above” if applicable.

1st Location: Address (or location description) _____

City_____ Zip_____ County_____

Size of area in production: _____ acres

List primary products you expect to raise at this location in 2018: _____

Owner of production location if different than primary vendor.

Name_____ Phone Number_____

Address_____

City_____ Zip_____ County_____

Land is rented____leased____other (explain)_____

For Office Purposes Only: Received_____ Approved_____ Denied_____ Notification_____

2nd Location: Address (or location description) _____

City _____ Zip _____ County _____

Size of area in production: _____ acres

List primary products you expect to raise at this location in 2018: _____

Owner of production location if different than primary vendor.

Name _____ Phone Number _____

Address _____

City _____ Zip _____ County _____

Land is rented _____ leased _____ other (explain) _____

Greenhouses: Location (1, 2 or on additional sheet), size and number of greenhouses, hoop houses or high tunnels:

Animals: (For meat, dairy, egg, pet food and soap Vendors) Location (1, 2 or on additional sheet), number and type of animals you currently keep for Market purposes. **Note:** Egg Vendors are required to provide a copy of their State Egg Board license.

Collected/Gathered Items: Identify the location(s), if applicable, where items are collected or gathered and attach permission of property owner where gathered, if necessary. _____

Apiaries: List number of apiaries, by county, and total # of hives, on average, kept for Market vending purposes:

Tell us where you sell your farm products & the approximate % sold there. Ex: Bloomington Community Farmers' Market 50% plus Carmel Farmer's Market 50% = 100%

Location		Percent
1)	_____	_____
2)	_____	_____
3)	_____	_____
4)	_____	_____
Total =		100%

Farm Tours: The Market organizes a summer and fall farm tour. Would you be interested in potentially hosting a farm tour?

Yes ☐ No ☐

Senior Discount: In order to receive the Senior Discount, all vendors and stand assistants on contract need to be 60 years of age or older by the space reservation meeting on February 26, 2018 . Do you qualify? Yes ☐ No ☐

This Agreement is effective upon approval of Market staff. Notification of approval or denial to sell will be issued to new vendors and declined applicants only.

Primary Vendor's Signature

Date